Controlling Quacks

651. SHRI RAVULA CHANDRA SEKAR REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that a large percentage of people depend on quacks, and many people are going to ojhas and majic healers who are mercifully somewhat less expensive than quacks;

(b) if so, the comments of Government thereon;

(c) whether there is a strong need for reducing the dependence of the people, particularly the rural poor, on exploitative private healthcare;

(d) if so, the steps taken by the Government during the last two years, State-wise;

(e) whether Government are facing financial crunch to curb such situations;

(f) if so, the reasons therefor; and

(g) the steps taken/to be taken by Government to improve the situation in each State/U.T.?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (g) Health is a State subject and therefore it is the primary responsibility of the State Government to ensure availability of proper healthcare facilities for all sections of people and also take appropriate action against violators of law. The Central Government supplements the efforts of the State Government through various schemes and national programmes. The Central Government has launched a National Rural Health Mission as a comprehensive rural health care programme to provide integrated health care service to the people especially the rural poor.

Absenteeism of Health care Officials

652. SHRI RAVULA CHANDRA SEKAR REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that the absenteeism of health-care officials in many areas coupled with inadequate facilities for primary healthcare is prevailing in the country;

(b) if so, the reasons therefor;

(c) whether Government are also aware that this has given scope for exploitation of the patients by quacks;

(d) if so, the number of cases reported in each State/U.T. in this regard during the last two years;

(e) the action taken against the culprits as on date;

(f) whether Government are making efforts to strengthen public health services to remove such apprehension among the people; and

(g) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (e) The biggest challenge in the delivery of primary health care, especially in rural areas is to ensure the availability of services of doctors. Reasons for their absenteeism are varied like delays in recruitment, inappropriate personnel policy, lack of basic amenities and incentives for working in the rural areas etc. As far as facilities for primary health care are concerned, there is a shortage of 21983 Sub-centres as against the requirements of 158792 Sub-centres, shortfall of 4436 PHCs as against the requirement of 26022 and shortfall of 3332 CHCs as against the requirement of 6491 as on September, 2004 to meet the population norm as per Census 2001. While it is true that there is scope for exploitation of patients by quacks, no data is maintained in this Ministry about the number of people exploited and the action taken against the culprits.

(f) and (g) Yes sir, under National Rural Health Mission, it is proposed to strengthen public health services by strengthening/upgrading of health centres, providing adequate manpower in the rural areas codifying new Indian Public Health Standards, setting norms for infrastructure, staff, equipment, management, etc. for health centres, promotion of stake holder committees (Rogi Kalyan Samiti) for hospital management, compliance to Citizen's Charter, active integration of AYUSH, creation of new Sub-centres and Community Health Centres to meet the population norm as per Census 2001, Public Private Partnership for public health goal including regulation of private sector etc.